

ASTHMA ACTION PLAN

Take this ASTHMA ACTION PLAN with you when you visit your doctor

ACTION PLAN FOR

Name
Date
Next asthma check-up due

DOCTOR'S CONTACT DETAILS

Name
Phone

EMERGENCY CONTACT DETAILS

Name
Phone
Relationship



WHEN WELL

Asthma under control (almost no symptoms)

ALWAYS CARRY YOUR RELIEVER WITH YOU

Your preventer is:
(NAME & STRENGTH)

Take puffs/tablets times every day
 Use a spacer with your inhaler

Your reliever is:
(NAME)

Take puffs

When: You have symptoms like wheezing, coughing or shortness of breath
 Use a spacer with your inhaler

Peak flow* (if used) above:

OTHER INSTRUCTIONS

(e.g. other medicines, trigger avoidance, what to do before exercise)



WHEN NOT WELL

Asthma getting worse (needing more reliever than usual, having more symptoms than usual, waking up with asthma, asthma is interfering with usual activities)

Keep taking preventer:
(NAME & STRENGTH)

Take puffs/tablets times every day

Use a spacer with your inhaler

Your reliever is:
(NAME)

Take puffs

Use a spacer with your inhaler

Peak flow* (if used) between and

OTHER INSTRUCTIONS

(e.g. other medicines, when to stop taking extra medicines)

Contact your doctor



IF SYMPTOMS WORSEN

Severe asthma flare-up/attack (needing reliever again within 3 hours, increasing difficulty breathing, waking often at night with asthma symptoms)

Keep taking preventer:
(NAME & STRENGTH)

Take puffs/tablets times every day

Use a spacer with your inhaler

Your reliever is:
(NAME)

Take puffs

Use a spacer with your inhaler

Peak flow* (if used) between and

OTHER INSTRUCTIONS

(e.g. other medicines, when to stop taking extra medicines)

Contact your doctor today

Prednisolone/prednisone:

Take each morning for days



DANGER SIGNS

Asthma emergency (severe breathing problems, symptoms get worse very quickly, reliever has little or no effect)

**DIAL 000 FOR
AMBULANCE**

Peak flow (if used) below:

Call an ambulance immediately
Say that this is an asthma emergency
Keep taking reliever as often as needed

Use your adrenaline autoinjector (EpiPen or Anapen)



**National
Asthma
Council
AUSTRALIA**

nationalasthma.org.au

ASTHMA ACTION PLAN

WHAT TO LOOK OUT FOR

WHEN WELL



THIS MEANS:

- you have no night-time wheezing, coughing or chest tightness
- you only occasionally have wheezing, coughing or chest tightness during the day
- you need reliever medication only occasionally or before exercise
- you can do your usual activities without getting asthma symptoms

WHEN NOT WELL



THIS MEANS ANY ONE OF THESE:

- you have night-time wheezing, coughing or chest tightness
- you have morning asthma symptoms when you wake up
- you need to take your reliever more than usual
- your asthma is interfering with your usual activities

THIS IS AN ASTHMA FLARE-UP

IF SYMPTOMS GET WORSE



THIS MEANS:

- you have increasing wheezing, cough, chest tightness or shortness of breath
- you are waking often at night with asthma symptoms
- you need to use your reliever again within 3 hours

THIS IS A SEVERE ASTHMA ATTACK (SEVERE FLARE-UP)

DANGER SIGNS



THIS MEANS:

- your symptoms get worse very quickly
- you have severe shortness of breath, can't speak comfortably or lips look blue
- you get little or no relief from your reliever inhaler

CALL AN AMBULANCE IMMEDIATELY: DIAL 000
SAY THIS IS AN ASTHMA EMERGENCY

**DIAL 000 FOR
AMBULANCE**

ASTHMA MEDICINES

PREVENTERS

Your preventer medicine reduces inflammation, swelling and mucus in the airways of your lungs. Preventers need to be taken **every day**, even when you are well.

Some preventer inhalers contain 2 medicines to help control your asthma (combination inhalers).

RELIEVERS

Your reliever medicine works quickly to make breathing easier by making the airways wider.

Always carry your reliever with you – it is essential for first aid. Do not use your preventer inhaler for quick relief of asthma symptoms unless your doctor has told you to do this.

To order more Asthma Action Plans visit the National Asthma Council website.
A range of action plans are available on the website – please use the one that best suits your patient.

nationalasthma.org.au

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